

# 2007 - 2008

## NCLB Programmatic Monitoring

# Compliance Activities Worksheet

Cycle

5

LEA \_\_\_\_\_

Date \_\_\_\_\_

Person Completing Checklist \_\_\_\_\_

E-mail Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Item To Be Addressed	How Item Will Be Addressed <small>(Use verbs like develop, disseminate or train)</small>	LEA Person Who Is Responsible	Date Completed
Completion of Cycle 4 On-Site monitoring compliance activities.			
<b>Technical assistance requested for:</b> _____ _____	<b>Contacted:</b> <input type="checkbox"/> ADE Specialist or <input type="checkbox"/> Consultant or <input type="checkbox"/> Other _____		